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11/18/2009

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MEYERTONS, HOOD, KIVLIN, KOWERT & GOETZEL, P.C. P O BOX 398

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APPLICATION NO. FILING DATE	FIRST NAMED INVENT	OR ATTORNI	EY DOCKET NO.	CONFIRMATION NO.
10/769,745 01/30/2004	Mitta Suresh	5838-	06701/EBM	7218
TITLE OF INVENTION: METHOD AND SYSTEM FOR IMAGING PROCESSING AND CONTOUR ASSESSMENT				
APPLN. TYPE SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional Yes	\$755.00	\$300.00	\$1,055.00	02/18/2010
EXAMINER	ART UNIT	CLASS-SUBCLASS		
Cwern, Jonathan	3737	600-407000		
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 	For printing on the page, list	patent front 1 <u>Meyerton</u>	s, Hood, Kivlin, Kowert &	Goetzel, P.C.
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 2 Eric B. Meyertons			
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	(2) the name of a single tas a member a registered agent) and the names registered patent attorney If no name is listed, no r	firm (having lattorney or of up to 2 vs or agents.		
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(A) NAME OF ASSIGNEE:	(B) RESIDENCE (CITY & STATE OR COUNTRY):			
Chase Medical, L.P.	Richardson, Texas			
Please check the appropriate assignee category indicated below (will not be printed on the patent): 🔲 individual 🔀 corporation or other private group entity 🔲 government				
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5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27 b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).				
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Authorized Signature	/-	Date	2/11/10	·
Typed or printed name <u>Eric B. Meyertons</u>		Regis	tration No: 34,876	
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